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Bib Data Sheet

CONFIRMATION NO. 2631

<b>SERIAL NUMBER</b> 09/804,982	<b>FILING DATE</b> 03/13/2001 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2643	<b>ATTORNEY DOCKET NO.</b> 2506.2008-005
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *Subman*

THIS APPLICATION IS A CIP OF 09/524,501 03/13/2000  
WHICH IS A CIP OF 09/263,593 03/05/1999  
WHICH IS A CIP OF 08/815,852 03/12/1997 PAT 5,881,159  
WHICH CLAIMS BENEFIT OF 60/157,972 10/06/1999  
AND CLAIMS BENEFIT OF 60/157,870 10/06/1999  
AND CLAIMS BENEFIT OF 60/145,321 07/23/1999  
AND CLAIMS BENEFIT OF 60/161,214 10/22/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 04/26/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>SN</i>	STATE OR COUNTRY NJ	SHEETS DRAWING 17	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 7
Examiner's Signature		Initials			

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# 21005

## TITLE

Hearing aid with tinted components

**FILING FEE RECEIVED**  
1520

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
<input type="checkbox"/> 1.18 Fees ( Issue )
<input type="checkbox"/> Other _____
<input type="checkbox"/>